

General

Title

Cancer screening: percentage of individuals aged 50 to 74 years who had a fecal occult blood test (FOBT) performed during the measurement year or a colonoscopy during the previous nine years (including the measurement year).

Source(s)

Manor O, Shmueli A, Ben-Yehuda A, Paltiel O, Calderon R, Jaffe DH. National program for quality indicators in community healthcare in Israel report, 2011-2013. Israel: Ministry of Health; 2013 Jan 1. 22 p. [27 references]

Measure Domain

Primary Measure Domain

Clinical Quality Measures: Process

Secondary Measure Domain

Does not apply to this measure

Brief Abstract

Description

This measure is used to assess the percentage of individuals aged 50 to 74 years who had a fecal occult blood test (FOBT) performed during the measurement year or a colonoscopy during the previous nine years (including the measurement year).

Rationale

In Israel, approximately 5% of the population is susceptible to rectal and intestinal cancer. This type of cancer is responsible for one-tenth of fatalities due to malignant disease. Cancer mortality can be reduced with early detection. For the general population of individuals aged 50 to 74 years at standard risk, the Ministry of Health recommends performing a yearly fecal occult blood test (FOBT) (Ministry of Health, 2014). FOBT is an evidence-based method shown to reduce colon cancer mortality (Hewitson et al., 2008). Another evidence-based method shown to reduce colon cancer mortality includes the flexible

sigmoidoscopy (Atkin et al., 2010), however this test is rarely done in Israel since colonoscopy is the preferred visual inspection method. Colonoscopy is an optical examination that enables a visual inspection of the colon to detect colonic lesions, biopsy the colon, and the remove of polyps. This examination is recommended following positive results from an FOBT, as well as for people at high risk due to family history, people who suffer from pain or discomfort in the digestive system, and those with previous colon complications. The colonoscopy screen is a highly effective tool for the diagnosis of pre-cancerous tumors. In the general population of individuals aged 50 to 74 years, some groups often recommend a colonoscopy once every few years as a screening test for colon cancer (instead of an FOBT) (Telford et al., 2010); unfortunately, the rate of its use is low due to the discomfort caused by the examination. In Israel there are no formal recommendations for colonoscopy examinations.

Evidence for Rationale

Atkin WS, Edwards R, Kralj-Hans I, Wooldrage K, Hart AR, Northover JM, Parkin DM, Wardle J, Duffy SW, Cuzick J, UK Flexible Sigmoidoscopy Trial Investigators. Once-only flexible sigmoidoscopy screening in prevention of colorectal cancer: a multicentre randomised controlled trial. *Lancet*. 2010 May 8;375(9726):1624-33. [PubMed](#)

Hewitson P, Glasziou P, Watson E, Towler B, Irwig L. Cochrane systematic review of colorectal cancer screening using the fecal occult blood test (hemoccult): an update. *Am J Gastroenterol*. 2008 Jun;103(6):1541-9. [PubMed](#)

Manor O, Shmueli A, Ben-Yehuda A, Paltiel O, Calderon R, Jaffe DH. National program for quality indicators in community healthcare in Israel report, 2011-2013. Israel: Ministry of Health; 2013 Jan 1. 22 p. [27 references]

Ministry of Health. Israel National Cancer Registry. Colorectal cancer. Update data on morbidity, 2014. National Center for Disease Control; 2014. 6 p.

Telford JJ, Levy AR, Sambrook JC, Zou D, Enns RA. The cost-effectiveness of screening for colorectal cancer. *CMAJ*. 2010 Sep 7;182(12):1307-13. [PubMed](#)

Primary Health Components

Colon cancer screening; fecal occult blood test (FOBT); colonoscopy

Denominator Description

Individuals aged 50 to 74 years

Numerator Description

The number of individuals in the denominator who underwent an examination for the detection of fecal occult blood (FOBT) at least once within the measurement year or a colonoscopy during the nine previous years (including the measurement year)

Evidence Supporting the Measure

Type of Evidence Supporting the Criterion of Quality for the Measure

A formal consensus procedure, involving experts in relevant clinical, methodological, public health and organizational sciences

A systematic review of the clinical research literature (e.g., Cochrane Review)

One or more research studies published in a National Library of Medicine (NLM) indexed, peer-reviewed journal

Additional Information Supporting Need for the Measure

Unspecified

Extent of Measure Testing

Data quality assessment as well as performance audits were carried out in three stages: by each health plan, by the Quality Indicators in Community Healthcare (QICH) program directorate and by an accredited external auditor. Data checks that included logical tests for negative numbers, unit tests, and valid numerator and denominator entries as well as tests examining subgroups and changes over time were performed by each health plan internally and by the QICH program directorate. An external auditor conducted a procedural audit for each health plan as well as the for the QICH directorate.

Evidence for Extent of Measure Testing

Jaffe DH, Shmueli A, Ben-Yehuda A, Paltiel O, Calderon R, Cohen AD, Matz E, Rosenblum JK, Wilf-Miron R, Manor O. Community healthcare in Israel: quality indicators 2007-2009. *Isr J Health Policy Res.* 2012 Jan 30;1(1):3. [PubMed](#)

State of Use of the Measure

State of Use

Current routine use

Current Use

not defined yet

Application of the Measure in its Current Use

Measurement Setting

Ambulatory/Office-based Care

Managed Care Plans

Professionals Involved in Delivery of Health Services

not defined yet

Least Aggregated Level of Services Delivery Addressed

Single Health Care Delivery or Public Health Organizations

Statement of Acceptable Minimum Sample Size

Does not apply to this measure

Target Population Age

Age 50 to 74 years

Target Population Gender

Either male or female

National Strategy for Quality Improvement in Health Care

National Quality Strategy Aim

Better Care

National Quality Strategy Priority

Health and Well-being of Communities

Prevention and Treatment of Leading Causes of Mortality

Institute of Medicine (IOM) National Health Care Quality Report Categories

IOM Care Need

Staying Healthy

IOM Domain

Effectiveness

Data Collection for the Measure

Case Finding Period

The three-year measurement period

Denominator Sampling Frame

Enrollees or beneficiaries

Denominator (Index) Event or Characteristic

Patient/Individual (Consumer) Characteristic

Denominator Time Window

not defined yet

Denominator Inclusions/Exclusions

Inclusions

Individuals aged 50 to 74 years

Exclusions

Unspecified

Exclusions/Exceptions

not defined yet

Numerator Inclusions/Exclusions

Inclusions

The number of individuals in the denominator who underwent an examination for the detection of fecal occult blood (FOBT) at least once within the measurement year or a colonoscopy during the nine previous years (including the measurement year)

Exclusions

Unspecified

Numerator Search Strategy

Fixed time period or point in time

Data Source

Electronic health/medical record

Type of Health State

Does not apply to this measure

Instruments Used and/or Associated with the Measure

Unspecified

Computation of the Measure

Measure Specifies Disaggregation

Does not apply to this measure

Scoring

Rate/Proportion

Interpretation of Score

Desired value is a higher score

Allowance for Patient or Population Factors

not defined yet

Description of Allowance for Patient or Population Factors

This indicator is reported by stratification according to gender and age (determined by a team of experts), as well as socio-economic status (determined by the entitlement to an exemption from medical copayments).

Standard of Comparison

not defined yet

Identifying Information

Original Title

Colon cancer screening.

Measure Collection Name

National Program for Quality Indicators In Community Healthcare

Measure Set Name

Cancer Screening

Submitter

The Israel National Program for Quality Indicators in Community Healthcare - National Government Agency [Non-U.S.]

Developer

The Israel National Program for Quality Indicators in Community Healthcare - National Government Agency [Non-U.S.]

Funding Source(s)

The Israel National Institute for Health Policy Research

Composition of the Group that Developed the Measure

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Financial Disclosures/Other Potential Conflicts of Interest

Unspecified

Adaptation

This measure was not adapted from another source.

Date of Most Current Version in NQMC

2013 Jan

Measure Maintenance

Annually

Date of Next Anticipated Revision

Fall 2016

Measure Status

This is the current release of the measure.

The measure developer reaffirmed the currency of this measure in February 2017.

Measure Availability

Source not available electronically.

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NQMC Status

This NQMC summary was completed by ECRI Institute on April 13, 2016. The information was verified by

the measure developer on May 15, 2016.

The information was reaffirmed by the measure developer on February 26, 2017.

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Production

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